POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	O.B.	75209	1-14-00
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	RR	70029	2/2/00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔ .... Rejected	N .... Non-elected	
= .... Allowed	I .... Interference	
— (Through numeral)... Canceled	A .... Appeal	
÷ .... Restricted	O .... Objected	

Claim Final	Original	Date							Claim Final	Original	Date									Claim Final	Original	Date							
	1									51											101								
	2									52											102								
	3									53											103								
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	49									99											149								
	50									100											150								

If more than 150 claims or 10 actions
staple additional sheet here

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